

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

Susan B. Anthony List, Inc

(b) Address (number and street) ☐ check if different than previously reported

1800 North Kent Street Suite 1070

(c) City, State and ZIP Code

Arlington

VA

22209

2. FEC Identification Number

C C00000000

(d) Name of Employer or Principal Place of Business

(e) Occupation

3. Is This Statement

☒

New

or

☐

Amended

4. Covering Period

M M / D D / Y Y Y Y
05 / 19 / 2008

through

M M / D D / Y Y Y Y
05 / 19 / 2008

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y

(b) Communication Title Truth

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10(c)?

Yes ☐No ☒

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes ☒No ☐

8. Custodian of Records

(a) Name

Marjorie Dannenfelser

(b) Address (number and street)

1800 North Kent Street Suite 1070

(c) City, State and ZIP Code

Arlington

VA

22209

(d) Name of Employer or Principal Place of Business

Susan B. Anthony List, Inc

(e) Occupation

President

9. Total Donations This Statement

41120.00

10. Total Disbursements/Obligations This Statement

32840.00

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Emily Buchanan

SIGNATURE

DATE 05/20/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.